



“Life of the Case” Analysis

Eligibility: Title IV-E and TANF-EA

1. OUTCOMES

- ☐ Assurance of Protections for Children in Care
- ☐ Maximum Federal Reimbursement to State and Counties

Title IV-E of the Social Security Act provides federal funds to States to support certain expenses incurred for children requiring out of home care, who meet specific eligibility requirements. Title IV-E eligibility is based loosely on the requirements of the old AFDC program, as they were in place in 1996. In order to claim federal reimbursement, states must perform eligibility determinations on each child in foster care, and may claim reimbursement for costs incurred for only those children determined eligible. The federal government reviews state Title IV-E claims periodically; Indiana was found to be in substantial compliance with Title IV-E regulations in its first federal review in 2003, and is due for a second review no earlier than 2006.

Title IV-E requirements were developed in part to ensure that children in foster care are afforded certain considerations and protections. These requirements, and others imparted by later legislation such as the Adoption and Safe Families Act (ASFA) are all based in good social work practice, and aim to ensure that children are not removed from homes without judicial intervention, are placed only in licensed settings, and have specific plans in place for permanency, so they do not spend inordinate amounts of time in foster care. For these reasons, having a strong Title IV-E program is not just about the money; strong Title IV-E programs are often indicative of strong child welfare practices.

Indiana spends approximately \$40-60 million dollars per year to cover the costs of its foster care program. Federal funds are available through two sources; first, approved costs related to maintaining children in foster care settings may be reimbursed through Title IV-E *maintenance* claims. Maintenance covers such costs as clothing, shelter, food, and the reasonable costs of running child caring institutions, among others. Maintenance payments are made based on established rates for the specific setting in which a child is placed; the allowable maintenance claims are determined via a calculation of the setting's daily rate, multiplied by the number of days the child was placed in the specific setting. Thus, maintenance costs are tied directly to specific children in foster care. In Indiana, maintenance reimbursement funds are used to reimburse counties for the costs of supporting individual foster children.

The costs of administering the Title IV-E program are reimbursed via what is known as the Title IV-E *administrative* claim. In Indiana, administrative reimbursement funds are used to cover the statewide costs of administering the foster care system. Because it is difficult to tie administrative costs directly to specific children, administrative costs are reimbursed based on a formula, which includes the state's Title IV-E foster care penetration rate. In simplified terms, the penetration rate is an indication of the percentage of children in foster care who are eligible for Title IV-E. Thus, it is beneficial to a state to have a higher penetration rate, because it directly results in greater administrative reimbursement. In addition, the State's penetration rate will become very important if the federal government chooses to implement flexible funding/block grants; it is likely that the amounts allotted to States under this type of funding program would be based upon the Title IV-E penetration rate for a given base year. For this reason, future funding may be at risk if Indiana does not focus on increasing the Title IV-E penetration rate now.

It is important to note that a child's status in relation to Title IV-E should have no bearing on the specific services he or she receives while in foster care. The benefit of Title IV-E reimbursement is that the federal government shares in the costs of maintaining children in out of home placement, so it behooves the state to maximize the number of Title IV-E children, and to submit accurate claims. It is up



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to the states to manage their Title IV-E programs and to claim reimbursement, so a strong Title IV-E program assures that states receive the maximum amount of federal reimbursement they are due. This is money that can be used to offset the state's portion of foster care costs, freeing funds for use in other vital programs. In effect, a strong Title IV-E program ensures that Indiana's funds earmarked for foster care placements are put to the best possible use. This is especially important in a time when counties are heavily in debt, workers are overly burdened with high caseloads, and more and more of our neighbors are requiring services.

Summary

Although often seen by DCS staff as strictly a financial consideration, the Title IV-E program was actually developed to ensure that children in foster care are afforded certain protections, and to provide specific guidelines in developing a plan to move them into permanent, safe homes. To provide incentive to implement these safeguards, the federal government shares in the costs of running a foster care program, as long as states implement specific safeguards and comply with the federal Title IV-E guidelines. Funds obtained through the Title IV-E reimbursement program support states in their goals or providing for the safety, well-being and permanency of children in foster care.

2. CRITERIA

- ☐ Meet All Federal and State Requirements
- ☐ Timely Completion of Eligibility Determinations
- ☐ Submit Claim to Central Office/Federal Government

Meet All Federal and State Requirements

Federal Title IV-E policy sets minimum requirements that must be met in order for reimbursement to be claimed for the costs of foster care. In order to be initially eligible for Title IV-E, children must meet the following general criteria:

1. *Age*: must be under age 18, or at state option, under age 19 and expected to graduate from a full-time educational program by age 19;
2. *Citizenship*: must be a citizen or qualified alien;
3. *Specified Relative*: must be removed from the home of a specified relative, as defined by AFDC policy as of 1996;
4. *Deprivation*: must be deprived of the support of one or both parents;
5. *Financial Need*: must meet specific financial need criteria as defined by AFDC policy as of 1996;
6. *Agency Responsibility*: must be legally under the care and supervision of the state Title IV-E agency, or another public agency with whom the IV-E agency has an official interagency agreement.
7. *Court Language*: must be removed as a result of a judicial determination that removal is in the best interest of the child, and reasonable efforts were made to prevent removal.
8. *Reimbursable Placement*: must be placed in a Title IV-E eligible placement setting.

Once children are determined eligible for Title IV-E, redetermination of eligibility must be made whenever circumstances in the case change. Current federal guidelines recommend redeterminations at least once each year; however, proposed rule making indicates the federal government may actually require annual redeterminations in the future. In addition, judicial determination that reasonable efforts have been made to finalize a permanency plan for the child must be made within 12 months of the child entering foster care, and every 12 months thereafter.



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States have the option of creating more restrictive regulations for Title IV-E. If they do so, they are held to their own more restrictive standards in federal reviews. For example, Indiana does not allow claiming for children over age 18, even when enrolled in a full-time educational program. Indiana also requires redetermination of eligibility every six months, instead of once per year. Differences in Indiana and federal policy have been identified through a separate initiative, and recommendations made for changes that will allow Indiana to increase amount of reimbursement claimed.

Complete Timely Eligibility Determinations

In order to count a foster care case in the calculation of the Title IV-E penetration rate, or to claim reimbursement for maintenance costs for that case, a state must complete an eligibility determination. Through this process, counties identify for which cases they may claim federal reimbursement. The eligibility determination process requires the collection of information related to the child and family, and a decision about whether or not all eligibility criteria are met. In Indiana, the actual determination is performed by the ICWIS system; staff are required to collect information, enter it into ICWIS, and verify the determination that is made. Counties submit claims to Central Office, where fiscal staff submit the statewide claim to the federal government quarterly; thus, it is beneficial to counties and the state to complete eligibility determinations as quickly as possible. In reality, some cases are not determined in a timely manner, either due to county workloads, or unavailability of needed information. Each undetermined case represents money “left on the table” that could be put to use in the foster care program.

Submit Claim to Central Office/Federal Government

Once an eligibility determination is complete, county Bookkeepers must prepare and submit claims to Central Office for final submission to the federal government. Funds cannot be reimbursed if a claim is not submitted. Each county has its own process for notifying Bookkeepers of the need to submit claims. Currently, the ICWIS system does not have a claiming component, and Subject Matter Experts (SMEs) indicated that each county processes and submits claims in its own way. Work is currently underway to develop a statewide accounting system that would standardize the claiming process.

As part of the Title IV-E federal review process, reviewers compare the claims that were submitted to the child’s eligibility history to ensure that claims were paid only for those time periods in which the child was eligible for Title IV-E. For this reason, it is very important that there be a strong connection between the eligibility determination and the claiming process. If the claims and eligibility history do not match, states are required to return the federal reimbursement obtained for the case, and may be required to pay a penalty.

Summary

States must ensure that children meet all federal and state eligibility criteria by completing an eligibility determination before submitting a claim for federal reimbursement. In order to maximize the amount of federal reimbursement that may be obtained, states should aim to complete eligibility determinations in a timely manner, and must ensure that all cases determined eligible are included in the quarterly claim prepared by the county Bookkeepers. In addition, safeguards must be in place to ensure that no claims are submitted for ineligible children. If the claims submitted to the federal government do not coincide with a child’s actual eligibility history, states risk paybacks and possibly penalties as a result of federal reviews.

3. ACTIVITIES

- ☐ Collect and Organize Eligibility Information



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- ☐ Analyze Information Against Eligibility Criteria
- ☐ Finalize Eligibility Decision
- ☐ Supervisory Review and Quality Assurance
- ☐ Handoff / Case Transfer
- ☐ Documentation

Collect and Organize Eligibility Information

Initial Eligibility Determination

The initial IV-E eligibility phase of the life of the case begins when a child is removed from the home and placed in out-of-home care. Once the child is removed, the Investigator must notify the appropriate parties of the removal so that eligibility determination activities may begin- those notified may include an FCM, eligibility worker or county Bookkeeper. Notification methods vary by county; some counties have specific forms used for this purpose and in smaller counties, word of mouth is the method of notification. In some counties, necessary notification of public assistance staff, when applicable, is made by the eligibility staff or the FCM.

Once notification is made, the party responsible for determining eligibility (which may be an FCM, a dedicated eligibility worker, or a Bookkeeper, depending on the county) must begin the process of collecting information for the determination (the term “eligibility worker” will be used to identify the person responsible for this process). In reality, the process involves more than just Title IV-E; eligibility for TANF EA will also be considered at this phase in the life of the case. The process to determine a family’s eligibility for TANF-EA begins with a notice of the substantiation of an allegation of abuse or neglect, or a CHINS adjudication. As in the IV-E eligibility notification process, the process for notification of the need for a TANF-EA eligibility determination varies by county.

Information essential to the determination of Title IV-E and TANF-EA eligibility must initially be collected from the family by the Investigator or the FCM, whichever person is involved with the case at the point where removal becomes necessary. The FCM will attempt to gather as much information from the parent(s) as possible. Though there is no standardized method in state policy or practice to collect the relevant initial eligibility information, some counties may require forms to be completed by the family, and some counties have forms that must be completed by the worker in conjunction with the family in the detention packet. Some juvenile courts will order the family to provide required information to DCS.

Once the child is removed, the eligibility worker must collect information to verify the child’s eligibility status. The verification policy detailing specific sources of information that must be used in the process will be changed as of May 23, 2005, but in general, eligibility workers must collect data from computer systems or other documents in order to demonstrate that a child meets each Title IV-E eligibility criterion. Examples of sources of information to be used include:

1. ICES System
2. Government Records or Documents
3. Tribal Records or Documents
4. Court Documents
5. Financial Institution Documents
6. Employer/Wage/Labor Organization Documents
7. Tax Documents
8. Social Security Administration Documents
9. Vehicle/Other Asset Documents



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10. Medical Documents
11. Immigration Documents
12. Third Party Statements
13. Client Statements or Records
14. Family Statements or Records
15. School Documents
16. Contracts
17. Vital Statistics

If the family has previously received public assistance, the information listed above may be located and copied from the public assistance file and will be helpful in both IV-E and TANF-EA determinations. Other information, such as income, can be verified in ICES, which is the public assistance data system. Not all FCMs have the access or knowledge to work in the ICES system, so typically they either contact public assistance staff, or request the assistance of another worker with ICES access.

Other documentation required per state policy are forms that the DCS staff person, whether it be the FCM or eligibility worker, must complete. These forms include the following:

1. SF47991/FI2403 *Application for Assistance, Part III*
2. SF136642/FPP3304 *Initial Eligibility*
3. SF1883/5A *Initial Eligibility Budget*
4. SF12533/5F *Ongoing Budget*
5. SF17769/FPP0335 *Placement Record*
6. FPP0038 *Notice of Action*

Though state policy dictates that all of these forms be completed, in practice, very few counties do so, and use of the forms is inconsistent. The most recent complete state policy revision was issued in 1995, prior to the ICWIS system's ability to determine eligibility. Subject Matter Experts (SMEs) indicated, however, that some counties still complete the budgeting forms, due to the inability to view the budget calculations in the ICWIS system.

All information collected is entered into the ICWIS system, if applicable, by either the FCM or the eligibility worker, whatever is the case in each particular county. In the majority of counties, the FCM is responsible for entering the data into ICWIS; a few counties have eligibility staff that enter this information. Much of the information necessary for TANF-EA determinations in ICWIS is automatically populated from data entered into the IV-E eligibility screens. The worker must then enter in information specific to TANF-EA, and update any of the information that transfers from the IV-E screens.

There are many requirements in state policy and federal regulations for Title IV-E, and these requirements can be confusing for most DCS staff. Many FCMs do not understand the requirements needed for IV-E eligibility, and there are no standard decision support tools to assist them in collecting necessary documentation. A tool that briefly explains the requirements, documentation needed for each requirement, and the reasons IV-E is important to services for children would enhance the state's ability to increase IV-E reimbursement. Information that needs to be collected for IV-E and TANF-EA eligibility determination is most often the same type of information that is also important for a child welfare worker to have available in the case record. If staff had a reliable and accurate tool to use during this critical



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time, it is anticipated that they would make more stringent efforts to collect the information, positively impacting the state's reimbursement and case management effectiveness.

Ongoing Eligibility Determination

In addition to the Initial Determination, eligibility staff must also collect information to verify the child's ongoing eligibility. Ongoing eligibility consists of two processes: *redetermination of eligibility*, and *verification of reasonable efforts towards permanency*. According to state policy, redeterminations must be completed every six months (federal policy does not currently provide a timeframe, but pending rulemaking indicates the federal requirement will soon be one year). Verification of the reasonable efforts towards permanency must occur every year, according to both state and federal policy.

The FCM of record will automatically receive a tickler in ICWIS 45 days prior to the date the redetermination is due. Supervisors receive ticklers if the deadline nears, and the necessary information still has not been entered. If the deadline passes and the information is not entered, the case will appear on the pending roster. Though practice varies in the process, information on the child's continued deprivation, income and other resources must be re-verified. This review may be accomplished by a statement from the FCM or other appropriate documentation which is then entered into the ICWIS verification screen, and any other screen necessary. In order to collect the information, state policy requires a home visit as part of the redetermination process, though in practice, home visits are only done by FCMs as an activity in case management, not as an activity for the purposes of determining IV-E eligibility. Federal policy does not require a home visit for Title IV-E redetermination purposes.

SMEs indicated that eligibility redeterminations are often done incorrectly or not at all. When redeterminations are completed and the child's eligibility status has changed, there is no state policy related to communication with bookkeeping staff, leaving counties to develop varied methods of communication amongst staff who have varying levels of expertise. Though Bookkeepers have access to ICWIS, and receive automatic email notifications when a child's placement changes, not all Bookkeepers in the counties utilize ICWIS as the system to gain their information. SMEs indicated that even though Bookkeepers have ICWIS access, they still must be notified if the eligibility status changes so they are aware they need to review the case. A decision support tool to assist in the collection of information and communicating with bookkeeping staff would have a positive impact on federal reimbursements.

According to federal requirements, in order for DCS to continue claiming Title IV-E, the court must find that "reasonable efforts to finalize a permanency plan" have been made. The FCM of record will receive an ICWIS tickler notification 30 days ahead of the date a permanency review is due. In reality, the hearing may already have occurred but data entry from ICWIS may still be pending as of the date the tickler is received. When the order from the court is received, the FCM or eligibility staff verifies the court order language meets the federal requirements, and enters the date of the court order into ICWIS. The court order is then placed in the child's case or eligibility section. Whenever a permanency hearing is held, this process should be followed. The child's eligibility will be reestablished by ICWIS whenever the court information is entered. If information is not entered into ICWIS by the due date, eligibility will automatically run and the child's eligibility status changes to "ineligible." When all required information is entered into ICWIS, eligibility may be re-run, and the FCM of record will receive another tickler with the updated eligibility determination.

SMEs indicated that there is confusion amongst eligibility staff and ICWIS staff relating to the appropriate court order date to enter into ICWIS, both for initial and ongoing eligibility determination criteria. Sometimes, a court hearing will be held on one day, and the court order is actually signed by the judge days or weeks later. Eligibility staff throughout the state have indicated that the ICWIS helpdesk sometimes instructs eligibility staff to enter the date that the court order was signed, rather than the date of the order, into ICWIS. This practice is not consistent with federal intention, and may cause loss of claiming or even complete loss of eligibility.



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Analyze Information against Eligibility Criteria

The actual eligibility determination is made by the ICWIS system, which takes all data entered by staff and runs a series of calculations and comparisons to programmed criteria. Once all of the appropriate information is collected for initial IV-E eligibility, it must be verified to ensure all information entered into the ICWIS system is accurate. This step includes completion of the verification screen and review of the checklist screen in ICWIS. Once these steps are completed, the eligibility process is ready for completion. Submission for the initial determination is a manual process for the first 30 days following placement, and the ICWIS determination runs overnight. If 30 days have elapsed since placement, ICWIS will automatically run eligibility on the night of the 30th day after placement. Once eligibility runs in ICWIS, a tickler is sent to the FCM if data is missing, which must be entered into ICWIS and resubmitted.

Redeterminations are run in ICWIS on the night of the due date, whether or not the required information has been entered. If the information is not entered into ICWIS by the due date, the case will be placed on the “pending roster” for action (the pending roster is a list of cases for which additional action is needed. There is a pending roster for each county, and a master list for the centralized eligibility unit). If the information is entered into ICWIS incorrectly, and the eligibility needs to be re-run, assistance from the Central Eligibility Unit may be needed to perform a system override. ICWIS does provide an output to assist staff in determining what information is missing or incorrect, but SMEs indicated it is not always clear to staff, many of whom perform eligibility determinations only rarely, or as one small part of their overall responsibilities, what information is missing or what has been entered incorrectly.

Finalize Eligibility Decision

In practice, the ICWIS system's output (or “decision”) should be reviewed by eligibility staff to verify the accuracy, but this is not specified in written policy. The FCM of record will receive a tickler notifying him or her of the eligibility status. In the past, the Centralized Eligibility Unit used to review all cases for which the ICWIS output was a “DENIED” status; this is no longer standard practice, although the Supervisors and Directors in some counties continue to review denied cases on a regular basis. The lack of clear policy relating to review of denied cases is problematic, given that SMEs indicated that the ICWIS determination is often incorrect, usually due to an error in the information entered by the worker.

When eligibility is reviewed after the ICWIS run, eligibility workers, FCMs, Supervisors, and Directors, whichever conducts the review, will see one of the following results:

1. The child's eligibility is determined correctly
2. The child's eligibility is determined incorrectly
3. There is missing information and the child is placed on the pending roster.

The process followed to resolve discrepancies and correct errors is different in every county; however, all staff have available to them the ICWIS helpdesk, and a Central Eligibility Consultant assigned to their county.

Eligibility workers must make a few other specific decisions after the ICWIS eligibility determination is verified. If the IV-E determination is considered to be accurate, and the child is not eligible, the FCM or eligibility worker will review the information to consider other funding sources available to reimburse the county for expenses incurred in placing and maintaining the child in foster care. If the child is eligible for Title IV-E, the information is reviewed to determine whether the child is eligible for or currently receiving SSI. This review is necessary to determine which funding source is more beneficial to the DCS (title IV-E and SSI may be claimed concurrently, however, there are specific rules about how much may be claimed for each program if both are claimed. In reality, most counties choose to claim one or the other, not both concurrently). SMEs indicated that many counties do not perform this analysis, and if it is done, practice varies by county. There is no standard decision making tool or review process to assist in ensuring the decision is made accurately, which could result in counties not taking advantage of the most appropriate funding streams available to them.



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The ICWIS TANF-EA determinations must also be reviewed. In fact, staff most often will perform a manual TANF-EA eligibility determination, because the TANF-EA module in ICWIS is not as comprehensive as the IV-E module, and experience shows many errors in this determination. If the TANF-EA determination is completed and considered to be accurate, a notification is sent to the family for all approvals and denials, if the family actually signed the original application. If the family appeals a denial, the appeal must be written and filed with the agency within 30 days of the action as recorded on the notice.

If the family is eligible for TANF-EA, the FCM or eligibility worker must choose between this funding stream and Title IV-E. Written policy relating to the duration and use of TANF-EA funds is inconsistent. For example, federal TANF-EA policy allows for 180 days of claiming under the program. The Indiana TANF State Plan indicates that TANF-EA funds may be used for 120 days. However, the FSSA Division of Family and Children Manual of Policies/Procedures #5-A-002 indicates that services may be authorized for up to 180 days from the date of application. No documentation could be located explaining why Indiana may have changed its policy to claim only 120 days.

Additionally, the order of eligibility determination and application of the two funding sources differs in various policy sources. The existing Child Welfare Policy Manual does not address TANF-EA specifically, as the TANF program did not exist when the manual was written. The pending revision of Section 9 (not distributed) indicates that TANF-EA must be determined *after* a Title IV-E determination is made, but in practice, SMEs indicated that counties determine TANF-EA first, because the reimbursement available through this program is at a higher rate. This is problematic because it is not consistent with federal or state policy relating to TANF-EA; the program is meant to provide short-term, immediate relief to families with emergencies expected to be short in duration. TANF-EA may be used to pay for placements, but this funding stream was not meant to cover costs of long-term out-of-home care. Using TANF-EA funds to cover the first 120 days of all placements, as is the practice in some counties, is not consistent with the program's goals or rules.

In Title IV-E, the on-going eligibility determination is also completed in the ICWIS system. In addition to the ICWIS information, current state policy calls for the SF1883/5A *Initial Eligibility Budget* and the FPP0038 *Notice of Action* forms to be completed. However, this rarely occurs in practice, and most staff considers these forms to be obsolete since the eligibility determination is actually completed in ICWIS. Policy should be reviewed and clarified to present only the forms and processes which are required for the redetermination of eligibility.

Supervisory Review and Quality Assurance

The Child Welfare Policy Manual does not require Supervisory review or approval of the following key points in the eligibility phase of the life of the case:

- ☐ The eligibility information entered in the IV-E module of the ICWIS system
- ☐ The TANF-EA eligibility determination
- ☐ The IV-E eligibility determination
- ☐ The decision whether SSI or IV-E is more beneficial
- ☐ Permanency requirements

FCMs or eligibility staff may direct questions to Supervisors on an as-needed basis, but there is no formal process for involvement of the Supervisor that is consistent in all counties. This lack of review leaves eligibility determinations vulnerable to the level of expertise of the FCM or eligibility worker. While in general, most eligibility workers have had the ability to build more knowledge and expertise in eligibility than the FCMs, most eligibility determinations are completed by FCMs in the counties, and should have the benefit of a Quality Assurance review by the Supervisor.



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Decision support tools could assist the Quality Assurance efforts of Supervisors in the local offices, by detailing the required eligibility documentation information, how and where it should be entered in ICWIS, and guidelines or a decision tree to weigh the benefits of collecting SSI versus Title IV-E. These tools could assist in verifying the information prior to eligibility being run in ICWIS. Quality Assurance is always a process that should be built in at the key decision points, rather than waiting until the decisions have already been made. In this spirit, the same tools used by eligibility workers to make decisions could be used by Supervisors to verify decisions, effectively integrating the quality assurance process into the workflow process.

Handoff / Case Transfer

As different workers handle eligibility responsibilities in each of the counties, there are no clear and consistent identified handoffs in practice in the eligibility process. In some counties, the FCM is responsible for eligibility throughout the life of the case. In other counties, once the Investigator collects the initial eligibility information and completes the investigation, the case and the on-going eligibility responsibilities are transferred to an ongoing FCM. In yet other counties, once the FCM collects the initial eligibility information, the eligibility determination responsibilities are completed by a dedicated eligibility staff person. There are no clear requirements for transfer of the eligibility function of the case from one staff to another, or communication with Bookkeepers who submit the claims. As eligibility requirements must be gathered and entered into the ICWIS system within 30 days of placement, policy and decision support tools should be developed to address the gathering and entering of appropriate information to meet this timeframe.

Documentation

Current state policy as detailed in the Indiana Child Welfare Policy Manual does not address ICWIS data entry requirements, as the most recent available policy was issued before ICWIS was implemented. Therefore, there are many forms and manual processes mandated for documentation purposes that should be reviewed for their continued relevancy. As FCMs have great demand placed upon them in their regular duties, outdated, obsolete forms and procedures should be eliminated to allow the collection of IV-E information and the determination process to be as efficient as possible. Much of the other information required for eligibility documentation purposes are required both in hard copy format, and are required to be entered into ICWIS. A decision support tool would greatly assist the workers in increased efficiency by allowing them to have information as to what documentation is required and when, and whether it needs to be a hard copy and/or entered into ICWIS, and which screens.

Summary

Title IV-E and TANF-EA are important programs in the support of services to children and families, yet FCMs and eligibility workers are left to maneuver these programs and make significant decisions related to eligibility without the assistance of clear policy, decision support tools and consistent Supervisory guidance and Quality Assurance. Another identified concern is the amount of forms and work required by policy that may be obsolete, given that the Title IV-E eligibility decision is now done within ICWIS. The creation of a decision support tool that identifies the requirements for the eligibility programs, the timeframes for meeting those requirements and gives guidance to the entry of the necessary documentation into ICWIS would make the program eligibility determination process much more efficient and accurate.

4. DECISIONS

- ☐ Accuracy of Eligibility Determination
- ☐ Choice of Appropriate Funding Source



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☐ Amount to be Claimed

Accuracy of Eligibility Determination

As stated above, the ICWIS system actually performs the eligibility determination in Indiana. Workers enter all of the required data into ICWIS, and eligibility is determined in the overnight batch run. The FCM of record is notified via a tickler of the results of the determination. ICWIS will also provide notification if eligibility could not be determined due to missing or incomplete information.

SMEs indicated that often, the ICWIS eligibility results differ from what was expected. As good practice, eligibility workers should always review the ICWIS results; however, SMEs indicated that this does not always happen, due to workload constraints and in some counties, lack of detailed knowledge of the Title IV-E program required to judge the accuracy of determinations. In the past, the Central Eligibility Unit reviewed all denied cases to verify accuracy, but this is no longer standard practice. Some Supervisors do review eligibility determinations, but in general, there is little standard quality assurance practice to verify the results of the ICWIS eligibility determination. Other than the written policy in the Child Welfare and ICWIS policy manuals, there are no standard decision support tools to assist workers in reviewing eligibility determinations made by ICWIS.

Even if workers did review determinations, ICWIS does not actually display the results of all of its calculations. For example, the detailed financial calculations are not available to the worker for review, so if the case is denied based on financial need, workers are not able to verify how this determination was actually made.

Choice of Appropriate Funding Source

If a child is determined eligible for Title IV-E, counties must determine whether to claim reimbursement from this funding source, or from one of the other available funding sources, such as TANF-EA or SSI. This decision is based on a variety of considerations, including the amount of reimbursement available from the given programs, and the child's eligibility for each. SMEs indicated that in some counties, eligibility workers perform manual calculations to determine which program to use as a claiming source, while in other counties, Bookkeepers make this decision. The Child Welfare Policy Manual details the calculations to be made regarding both TANF-EA and SSI, however, SMEs indicated that adherence to the guidelines is not universal, and often it is unclear in a county who is responsible for making this decision.

Amount to be Claimed

Once the decision is made to claim Title IV-E reimbursement, county Bookkeepers must decide for which periods to claim reimbursement, and how much to claim for each eligible child. Although SMEs did not have insight into the bookkeeping process, prior research prompts some concerns in this area. A child's reimbursability may change from month to month, based on a number of factors that may not be known to Bookkeepers. Changes in a case may be tracked in ICWIS, but because ICWIS does not have claiming capability, Bookkeepers will not know about these changes unless they review ICWIS before submitting claims (which SMEs indicated does not happen regularly) or they are informed by the FCM or eligibility worker when changes occur. Clearly, the communication link between eligibility worker, FCM, and Bookkeeper is crucial to ensuring the cases are claimed accurately, for the correct periods of time and in the correct amounts.

Summary

Although ICWIS performs all of the detailed calculations for eligibility determinations, eligibility staff and FCMs must be responsible for reviewing the determination results, and facilitating the correction of inaccurate determinations. Decision support tools to facilitate the decision about appropriate funding sources should be developed, and a process to be followed consistently in all counties should be developed to ensure that eligibility determinations and claims are consistent. The county accounting



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system currently under development should aid in this process; however, clear training and decision support tools for Bookkeepers and eligibility staff will be necessary.

5. HANDOFFS/CASE TRANSFER

- ☐ Intake/Investigation to FCM
- ☐ FCM to Eligibility Worker
- ☐ Eligibility Worker to Bookkeeper

Depending on the county, there are several different handoffs that might occur in the Title IV-E eligibility determination phase in the life of the case. In some offices, the same person may be responsible for Intake, Investigation, Case Management, and Eligibility. However, in larger counties, there may be at least three significant handoffs that require clear policy guidance.

Intake/Investigation to FCM

The majority of the information needed in the eligibility determination is collected at Intake and/or Investigation. Title IV-E determinations require demographic, home living situation, and financial information that is most easily captured at Intake and Investigation. It is crucial not only that this information be obtained at the first phase in the life of the case, but that it be transferred to the ongoing FCM and/or eligibility worker to be used in eligibility determinations. As noted in the reports for these phases, there is no standard handoff procedure or requirements, so transfer of this information is not guaranteed. When this data is unavailable, practice in some counties is to contact the family again. This may be problematic to the goals of ensuring a positive perception of continuity and congruency of services; families who believe that there is a lack of coordination amongst DCS staff, and multiple people contacting them for similar information, may develop negative perceptions of the department and may be less willing to participate in a positive manner.

FCM to Eligibility Worker

Some counties have dedicated eligibility staff who do not carry caseloads, but instead perform all eligibility determinations on behalf of the FCMs of record. In this situation, eligibility staff would need to gather data from the FCM in order to perform the determination. SMEs indicated that, like other transfers, this process is not well-defined and differs by county. Dedicated eligibility staff work closely with the FCMs, public assistance workers, and sometimes even the families themselves to obtain information to complete determinations. Not only does this result in duplication of effort, but creates the continuity and congruency problems noted above. Information necessary to eligibility determinations should be, and often is, captured at Intake and/or Investigation, and should not have to be collected again by an eligibility worker.

Eligibility Worker to Bookkeeper

After the eligibility determination is complete, the eligibility worker or the FCM must provide information to the Bookkeeper to begin the claiming process. As noted earlier, this process differs in every county. Ideally, Bookkeepers would obtain all necessary information from ICWIS and develop the claim based on ICWIS. However, SMEs indicated that Bookkeepers do not universally access ICWIS (although they should all have the appropriate IDs and passwords to do so), and gain knowledge of cases to be claimed from those in their offices responsible for eligibility determinations.

The county accounting system under development may provide standardization in the submission of the claim to Central Office; however, it may not address the process by which Bookkeepers obtain information about eligible children. A process should be developed, preferably through ICWIS, by which



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Bookkeepers are informed about all cases eligible for claiming, and a subsequent process to reconcile the claims to the county's caseload should also be developed.

Summary

The number and types of handoffs will vary by county, depending on staffing and distribution of responsibilities. All counties should have standard handoff packets at each phase in the life of the case, and the process by which Bookkeepers obtain information to support claiming decisions should also be standardized.

6. RECOMMENDATIONS

Significant improvement in the claiming process may result from current initiatives to integrate some of the payment functions for Title IV-E into the ICWIS system. However, full integration will require time and training for all county and Central Office staff. In the meantime, steps should be taken to ensure the smooth transfer of information relating to claiming from eligibility or FCM staff to county Bookkeepers.

In addition to changes to the claiming process, an initiative is underway to redesign the entire eligibility process throughout the state, into a Centralized Unit that performs all eligibility determinations for all counties. The specific form that this Centralized Unit will take is still under consideration. However, no matter the final format chosen, incorporating the following recommendations should help streamline operations and make more accurate the state's Title IV-E eligibility determination process.

Policy / Procedures

1. Adopt recommended changes proposed as a result of the Sequoia Title IV-E policy review, completed earlier this year. The recommended changes address areas where Indiana's policy is more restrictive than required by federal guidelines, and areas where changes could lead to increased federal participation. These recommended changes are applicable to both the current eligibility framework, and the proposed Centralized Unit.
2. In counties with separate eligibility staff or units, develop a consistent process to notify eligibility staff when a child has been detained. Under a Centralized Unit, develop a method within ICWIS to notify staff of placements for all counties. This could be accomplished with a daily tickler or roster of some type.
3. Develop policy that supports a standardized method or practice for collection of the relevant initial and ongoing eligibility information. Under a Centralized Unit, hard copy data collection must occur at the county level, and a process for transferring this data to a Centralized Unit developed.
4. Update and streamline policy to eliminate any obsolete forms and processes in the initial and ongoing eligibility process, and ensure the process is as efficient as possible. Policy should contain only the forms and processes which are necessary for the determination of eligibility. Under a Centralized Unit, clear policy relating to who must complete each form – county or Centralized Unit staff – must be developed.
5. Develop policy and procedure to outline the required information needed by bookkeeping staff and how it should be communicated. Under a Centralized Unit, this notification must occur between the Centralized Unit and all counties. This could be accomplished with a monthly county-specific report.
6. Clarify conflicting policy related to the length of time allowed to claim services provided under the TANF-EA program. All written policy sources should be consistent.



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7. Revise policy to use TANF-EA funds for only those children expected to be in placement for short durations of time, who are not eligible for Title IV-E funds. Using TANF-EA funds for all children who enter care, which is practice in some counties, does not comply with federal TANF-EA regulations, and does not promote efficient use of these and Title IV-E funds. Children eligible for Title IV-E should be claimed to this source, and TANF-EA funds used for other children.

Decision Support and Validation Tools

1. Develop documentation checklists, decision trees for weighing the benefits of multiple eligibility programs, and timeframe guidance to support the timely and effective gathering of information for an accurate eligibility determination. Many FCMs do not understand the requirements needed for IV-E eligibility, and there are no standard decision support tools to assist them in collecting necessary documentation. A tool that briefly explains the requirements, documentation needed for each requirement, and the ICWIS screens necessary for data entry would assist the state in obtaining efficient, accurate determinations, ensuring the state is in compliance with federal requirements and having a positive impact on federal reimbursements. The tool should also contain information on how to choose between the various eligibility programs to bring the maximum benefit to the DCS.
2. Under a Centralized Unit, develop checklists and model case file formats to clearly indicate which tasks are the responsibility of the local office, and which are to be completed by the Centralized Unit.
3. Develop standard hand-off packet for use under the current infrastructure. This packet should clearly detail the information that should be passed from Investigation to FCM, FCM to eligibility staff, and eligibility staff to Bookkeeper.
4. Consider altering ICWIS to reflect the actual financial calculations used to determine Title IV-E eligibility. SMEs indicated that this may have been considered in the past, and rejected on the grounds that the guidelines governing federal funding for ICWIS would not allow for the addition of this functionality. Further research should be conducted, as the addition of a budget screen and the relevant calculations would facilitate the review of ICWIS eligibility determinations.

Supervisory Review and Quality Assurance

1. Clearly establish Supervisory Quality Assurance moments prior to submission of the eligibility information for the determination. Quality Assurance should be done prior to ICWIS running eligibility, to eliminate duplicating efforts and wasted time of both line and Supervisory staff.